

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7/25/04</u>		2 Serial/Patent # <u>10/635,468</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input type="checkbox"/>	Filing			\$							
<input type="checkbox"/>	Amendment			\$							
<input type="checkbox"/>	Extension of Time			\$							
<input type="checkbox"/>	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition		<u>11/5/03</u>	\$ <u>130</u>							
<input type="checkbox"/>	Issue			\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/>	Maintenance			\$							
<input type="checkbox"/>	Assignment			\$							
<input type="checkbox"/>	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>130</u>							
10 REASON:		8 TO BE REFUNDED BY:									
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/> Treasury Check									
<input type="checkbox"/>	Duplicate Payment	<input type="checkbox"/> Credit Deposit A/C #:									
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1"><tr><td>2</td><td>3</td><td>--</td><td>0</td><td>9</td><td>7</td><td>5</td></tr></table>			2	3	--	0	9	7	5
2	3	--	0	9	7	5					
<u>PTO error</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>RETAB</u>		TITLE: <u>Att</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>703 308 0963</u>									
OFFICE: <u>CPet</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****											
APPROVED: <u>[Signature]</u>		DATE: <u>9/13/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: